													optication or Docket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)											NTITY	OR	OTHER SMALL			
TOTAL CLAIMS			3					1	RATE	FEE	1	RATE	FEE			
FOR			NUMBER FILED			NUMBER EXTRA			BASIC FE	₹ 375.00	OR	Basic Fee	750.0	χ		
TOTAL CHARGEABLE CLAIMS			3 minus 20=			• []			X\$ 9=		OR	X\$18=	19	刃		
INDEPENDENT CLAIMS			5 minus 3 =			•			X42=		OR	X84=	17	٦		
MULTIPLE DEPENDENT CLAIM P				RESENT						+140=		OR	+280=	1	ヿ	
* If the	less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	94	R				
CLAIMS AS AMENDED - PART II											<u> </u>	10.,	OTHER	$\overline{}$	_	
9-9-13 (Calumn 1)					(Colur				SMALL	ENTITY	OR	SMALL	ENTIT	<u>٧</u>		
AMENDMENT A 동 호		CLAIMS REMAINING AFTER AMENDMENT				HIGH NUM PREVIX PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION FEI	AL	
To	tal	ŧ	31	Minus	}	# E	3/	• =		X\$ 9=		OR	X\$18=			
N IN	dependent	*	3	Minus		test	3			X42=		OR	X84=		\sqcap	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ı	+140=		OR	+280=		ヿ	
										TOTAL		00	TOTAL		\dashv	
3-16-05 (Column 1) (Column 2) (Column 3)										ADDIT, FEE	: L	Jon	ADDIT. FEE		၂	
	<u> </u>		CLAIMS			HIGH	EST	(Column 3)	1		ADDI-	1		ADD		
AMENDMENT B			EMAINING AFTER ENDMENT			NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TION	AL	
Ş To	otal	•	<u>3 </u>	Minus		-3	1	-		X\$ 9=		OR	X\$18=			
AM E	dependent BOT DOESE	•	<u>3</u>	Minus		***	3			X42=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								' [+140=		OR	+280=				
										TOTAL ADDIT. FEE	_ 1	OR	TOTAL ADOIT, FEE		コ	
2	-29.0	Çe	olumn 1)			(Colu	nn 2)	(Column 3)	•	ODII. FEE		•	AUGH. FEE			
			CLAIMS MAINING			HIGH	EST		ול		ADDI-	1		ADD	긁	
AMENDMENT C			AFTER ENDMENT			PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TION	IAL	
Ş To	otal	•	7	Minus	,	*	<u> </u>	- 0	H	X\$ 9=	\bigcirc	OR	X\$18=	0		
A D	dependent	•	2	Minus		***	3	- 0		X42=	0	OR	X84=	0		
	inoi MESE	NIA	IUN UP M	JEIIPL	e ue	CNUEN	CLAIM		ا ا	+140=	0	OR	+280=	0	ᅦ	
* If the	e entry in colu	nn 1	is less than t	ne entry	in colu	ma 2, write	o o in co	tumn 3.	. l	TOTAL	10	OR	TOTAL	छ	ᅱ	
!f th	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or independent) is the highest number in the hig												ADDIT. FEE	<u> </u>	\dashv	
The	Highest Num	1067 F	reviously Pa	id Far' (Total o	r independ	ent) is the	nighest numbe	er fou	ind in the a	ppropriate bo	x in co	wmn 1.			